

Commonwealth of Kentucky  
EDUCATION PROFESSIONAL STANDARDS BOARD  
Division of Certification, 100 Airport Road, 3<sup>rd</sup> Floor, Frankfort, Kentucky 40601  
Telephone (502) 564-4606 (888) 598-7667 www.epsb.ky.gov

## APPLICATION FOR CAREER/TECHNICAL—OCCUPATION-BASED EMERGENCY CERTIFICATE

### SECTION I. Applicant Information (type or print)

#### A. PERSONAL INFORMATION

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

Maiden Name: \_\_\_\_\_ Gender: ☐ Male ☐ Female

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number (\_\_\_\_) \_\_\_\_\_ ☐ Home ☐ Mobile

**Ethnic Identification – Optional (check one)**

☐ White, Non-Hispanic      ☐ Black, Non-Hispanic      ☐ Hispanic  
☐ Asian or Pacific Islander      ☐ American Indian      ☐ Other

### SECTION II. District Information

District: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

District Code Number: \_\_\_\_\_

FAX Number: (\_\_\_\_) \_\_\_\_\_

### SECTION III. Verifications

Prerequisites for Approval (pursuant to KRS 161.100; 16 KAR 2:030):

1. Diligent efforts have been made to recruit a qualified teacher, and the need to fill this position has been made known locally by appropriate means.
2. No Qualified teachers have applied for this position, and, as best as can be determined, a qualified teacher is not available for this position. For purpose of this regulation, "qualified" shall mean a teacher who holds appropriate certification unless the superintendent of the employing school district has documented evidence that the teacher is unsuitable for appointment.
3. This position will be filled by the best qualified person available, giving preference to the factors of academic preparation, prior teaching experience or related educational work, and personal attributes compatible with the demands of the teaching profession.
4. The person named in this application sustains good moral character and is at least 18 years of age.
5. The applicant has complied with the criminal records check required in KRS 160.380.
6. The district shall comply with the priority selection process for employment established in 16 KAR 2:030, Section 2, for substitute teachers.

I verify that the aforementioned prerequisite conditions/requirements have been met.

**Superintendent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### SECTION IV. Position Information and Board Order Information

- ☐ Full-Time or Part Time Teaching Assignment – District must submit this form to EPSB along with supporting documentation
- ☐ Substitute Teaching Assignment – District must submit this form to EPSB only if applicant answers "YES" to questions in Section V

Position Content Area: \_\_\_\_\_ Percentage of Schedule: \_\_\_\_\_

Grade Level of Assignment: ☒ (5-9) Middle ☐ High School (8-12)

Number of board order declaring qualified teacher not available for this position: \_\_\_\_\_

Date of board order number: \_\_\_\_\_

**District Contact Person:** \_\_\_\_\_ **Phone Number: (\_\_\_\_) \_\_\_\_\_**

#### B. ACADEMIC PREPARATION

- ☐ High School or equivalent
- ☐ Less than 64 college credit hours  
Total Hours: \_\_\_\_\_
- ☐ Between 64 and 95 college credit hours  
Total Hours: \_\_\_\_\_
- ☐ At least 96 college credit hours  
Total Hours: \_\_\_\_\_
- ☐ Bachelor's degree or above
- District must collect official transcript for their records
- ☐ Evidence of a minimum of four (4) years of occupational experience in the area to be taught attached to application

**Primary E-mail address:** \_\_\_\_\_

**Secondary E-mail address:** \_\_\_\_\_

NAME: \_\_\_\_\_

SSN: \_\_\_\_\_

**SECTION V. Character and Fitness**

A. Applicants are required to submit a national and state criminal background check. The criminal background check shall be conducted within twelve (12) months prior to the date of the initial application for certification.

- ☐ I am an applicant for initial certification in Kentucky and I have submitted or will submit my national and state background check.

B. If you have ever held, or currently hold a professional license, credential, or other document issued to you by any other jurisdiction other than Kentucky within the United States or abroad, enclose a copy of the certificate(s) and provide the following:

Type of Professional Certificate	State or Jurisdiction of Issuance	Issue Date	Expiration Date

**C. Disclosure of Background Information**

If you answer "yes" to any question below, SUBMIT a narrative with your application. The narrative should include dates, locations, school systems, court records, and any other information that explains the circumstances in detail.	<b>YES</b>	<b>NO</b>	Documentation Attached
1. Have you ever had a professional certificate, license, credential, or any document issued for practice denied, suspended, revoked, or voluntarily surrendered? If you have had a professional certificate, license, credential, or any other document issued for practice initially denied by a licensing body, but later issued, you must answer "yes."			
2. Have you ever been suspended or discharged from any employment or military service because of allegations of misconduct?			
3. Have you ever resigned, entered into a settlement agreement, or otherwise left employment as a result of allegations of misconduct?			
4. Is any action now pending against you for alleged misconduct in any school district, court, or before any educator licensing agency?			
5. Have you ever been convicted of or entered a guilty plea, an "Alford" plea, or a plea of nolo contendere (no contest) to a felony or misdemeanor, even if adjudication of the sentence was withheld in Kentucky or any other state? For the purpose of this application, minor traffic violations should not be reported. Convictions for driving while intoxicated (DWI) or driving under the influence of alcohol or other drugs (DUI) must be reported.			
6. Do you have any criminal charges pending against you?			
7. If you indicated "yes" to question #1 through #6, has the EPSB previously reviewed the information?  _____ (Date of Review)			

I declare that I understand the standard for personal and professional conduct expected of a professional educator in Kentucky. I further certify that I have read and examined the Professional Code of Ethics for Kentucky Certified School Personnel, 16 Kentucky Administrative Regulation 1:020, understand its provisions, and agree to abide by its terms during the course of my career as a professional educator.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Section VI. Affirmation**

I affirm and declare that all information given by me on this application is true, and correct, and complete to the best of my knowledge. I understand that any misrepresentation of facts, by omission or addition, may result in the denial or revocation of my teaching certificate. Further, I understand that KRS 161.120 provides that a teaching certificate may be revoked at any time upon determination that false information was presented toward obtaining a teaching certificate.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_